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Bib Data Sheet

CONFIRMATION NO. 5912

<b>SERIAL NUMBER</b> 10/007,620	<b>FILING DATE</b> 12/05/2001 <b>RULE</b>	<b>CLASS</b> 705	<b>GROUP ART UNIT</b> 2166	<b>ATTORNEY DOCKET NO.</b> 29794/37022A
<b>APPLICANTS</b> Tony Brummel, Middleton, WI; Carl D. Dvorak, Madison, WI; Khiang Seow, Madison, WI; Daniel Bormann, Waunakee, WI; Steve Larsen, Madison, WI; Andrew Ma, Madison, WI;				
<b>** CONTINUING DATA *****</b> THIS APPLN CLAIMS BENEFIT OF 60/257,970 12/22/2000				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 01/07/2002</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature _____ Initials _____		<b>STATE OR COUNTRY</b> WI	<b>SHEETS DRAWING</b> 9	<b>TOTAL CLAIMS</b> 40
<b>INDEPENDENT CLAIMS</b> 4				
<b>ADDRESS</b> 04743				
<b>TITLE</b> System and method for a seamless user interface for an integrated electronic health care information system				
<b>FILING FEE RECEIVED</b> 1184	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	